



### U.S. Department of Labor Employment Standards Administration

Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210 (Rev. 1986)

This report is mandatory under P.L. 86-257,

Form approved - OMB No. 1215-0188 Expires 11-30-2002

as amended. Failure to comply may result in	File No. 12978 y
criminal prosecution, fines and civil penalties	(To be assigned by U.S. Dept. of Labor)
as provided by 29 U.S.C. 439, 440.  File two copies.  Refer to instructions on page	3.
1. Full Name of Reporting Employer (including trade name, if any) and mailing address (Street Number, City, State, ZIP Code).  Contas Corporation 3201 Brobblyn  7t. Stayne, IN 46809	4. Report relating to fiscal period:  Beginning 6 / 0 2 and  Mo. Day Yr.
7t. Stayne, 1N 46809	Ending 5 3/ 02
2. Address of Principal Office, Mifferent from address in Item 1.  Centas Corporation  6800 Centas Blud Po Box 625 737  Cencinnate, OH 45262.5737	5. Indicate by checking appropriate box where records necessary to vertify this report will be available for examination.   Address in Item 1
<ol> <li>Any other address or addresses at which records necessary to verify this report will be available for examination.</li> </ol>	Address in Item 2  Address in Item 3
6. Type of organization.	TEC 7 9200
Corporation Partnership Individual Other (Specify)	QMEDI
7. Industrial Classification (Check appropriate box(es)):	
	nce, Insurance Services Other d Real Estate (Specify) G
8. READ CAREFULLY THE FOLLOWING QUESTIONS, TAKING INTO CONSIDERATION THE EXCLUSIONS INSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUESTIONS IS "YES," CHECK TO TION AND COMPLETE PART B, A COPY OF WHICH APPEARS ON THE REVERSE SIDE. COMPLETE A SIDE ANY OF THE QUESTIONS NUMBERED BA THROUGH 8F. IF THE ANSWER IS "YES" TO MORE THAN MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANS A. QUESTION.—During the past fiscal year did you make or promise or agree to make, directly or indirect of value (including reimbursed expenses) to any labor organization or to any officer, agent, shop stew labor organization?  M No Yes. If "Yes," enter the number of Part B's required for this question	HE BOX IMMEDIATELY FOLLOWING THE QUES- EPARATE PART B FOR EACH "YES" ANSWER TO ONE PART OF THE SINGLE QUESTION OR FOR SWER TO THAT QUESTION. ttly, any payment or loan of money or other thing
B. QUESTION.—During the past fiscal year did you make, directly or indirectly, any payment (included ployees, or to any group or committee of your employees, for the purpose of causing them to persuccise, or as to the manner of exercising, the right to organize and bargain collectively through represent the same time disclosing such payment to all such other employees?  No results for the payment of the purpose or at the same time disclosing such payment to all such other employees?	uade other employees to exercise or not to exer-
C. QUESTION.—During the past fiscal year did you make any expenditures where an object thereof, directly or coerce employees in the right to organize and bargain collectively through representatives of their or the past of the right to organize and bargain collectively through representatives of their organize.  If "Yes," enter the number of Part B's required for this question	
D. QUESTION.—During the past fiscal year did you make any expenditure where an object thereof, direct cerning the activities of employees or of a labor organization in connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the past of the connection with a labor dispute in white the connection with the connection	
E. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relation or organization pursuant to which such person undertook activities where an object thereof, directly or or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively through you make any payment (including reimbursed expenses) pursuant to such an agreement or arrangement.  No  Yes. If "Yes," enter the number of Part B's required for this question	indirectly, was to persuade employees to exercise ough representatives of their own choosing; or did
F. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relation or organization pursuant to which such person undertook activities where an object thereof, directly of concerning activities of employees or of a labor organization in connection with a labor dispute in white ment pursuant to such agreement or arrangement?  No Tyes. If "Yes," enter the number of Part B's required for this question	r indirectly, was to furnish you with information

TOTAL NUMBER OF PART B'S REQUIRED FOR THIS REPORT IS ....



### U.S. Department of Loor Employment Standards Administration Office of Labor-Management Standards



Name and Address of Reporting Employer

		-
File No.	E- 2499	И

(To be assigned by U.S. Dept. of Labor)

		Refer to Instructions on Page 3
8 E Indicate in blocks a	at left, question number to which this Part B , 3d paragraph under "What Must Be Filed."	relates and the consecutive number of this Part B with respect to that question. (See
9. PROVIDE THE FOLLOW	ING INFORMATION: Agreement	Payment Both.
<ul> <li>a. Name and address of group or organizati through whom a sepa made or to whom pa tures were made.</li> </ul>	on with whom or ployer (if an in	or organization or with em- dependent labor consultant,  c. Name and address of firm or labor organization with whom employed or affiliated.
CBC Consul	ting, Ltd.	
5900 Lorac	Drive	
Suite 101		
Clarkston,	MI 48346	
10. Date of the promise, a	greement or arrangement pursuant to which	h payments or expenditures were agreed to or made.
7-02		
Mo. Day	Yr. Oral	Written
11. a. Date of each payment or expenditure	b. Amount of each payment or expenditure	re c. Kind of each payment or expenditure (Specify whether payment or loan, and whether in cash or property)
(1)	(1)	(1)
11-27-02	\$ 36,300.00	CHECK
(2)	(2)	(2)
100	= 3	
(3)	(3)	(3)
12 Explain fully the size		.   \
For service	es rendered during the	union compains
1	T CHIDTOACES IN LUG AV	Ting blook comment is
	the employees the of the union.	rights, employer's rights,
	or the union.	S Redd 7
		DEC 192002
		Que de
	SIGNATURE	AND VERIFICATION
The above employer and	each of his undersigned duly and	
eport, including all document orrect, and complete.	ts referred to therein and attached hereto,	icers, declares, under the applicable penalties of law, that all of the information in this has been examined by him and is, to the best of his knowledge and belief, true,
//	M	
IGNED	, PRESIDE	NT SIGNED MINT CAUTAL TREASURER
Mason Dh	On 10-21-02 (If other title, crown out and write correct title above	in At Mason Ch , 10/21/03 UT other title, cross
City State	Date correct title above	City State Date correct title above.)

U.S. Department of or Employment Standards Administration Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210 (Rev. 1986)

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Form approved - OMB No. 1215-0188 Expires 11-30-2002

File No. E- 2497
(To be assigned by U.S. Dept. of Labor)

Refer to instructions on page 3.

1.	Full Name of Reporting Employer (including trade name, if any) and mailing address (Street Number, City, State, ZIP Code).	4. Report relating to fiscal period:
	Cintas Corporation	Beginning 06 01 01 and
	918 N. 5th Ave.	
-	Yakima, WA 98902	Ending 05 31 02
2.	Address of Principal Office, if different from address in Item 1.	
	Cintas Corporation	<ol><li>Indicate by checking appropriate box where records necessary to vertify this report will</li></ol>
	6800 Cintas Blvd., PO Box 625737 Cincinnati, OH 45262	be available for examination.
	01ne1nnac1, 01 45202	XX Address in Item 1
3.	Any other address or addresses at which records necessary to verify this report will be available for .	
	examination.	Address in Item 2
		Topos En 1967 3 E V E
6.	Type of organization.	1) MIG 6 2002 121
	Corporation Partnership Individual Other	MILL AUG 6 2002 LED
	(Specify)	USDOL/ESA MANAGEMENT
7.	Industrial Classification (Check appropriate box(es)):	DLMS/DQE/SRD
1	Manufacturing Mining Construction Transportation Communication Wholesale and Fina	
	and Utilities Retail Trade and B C D E F	d Real Estate (Specify) G ☐ HX[X]
0	READ CAREFULLY THE FOLLOWING QUESTIONS, TAKING INTO CONSIDERATION THE EXCLUSIONS	
	INSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUESTIONS IS "YES," CHECK TO ANY OF THE QUESTIONS IS "YES," CHECK TO ANY OF THE QUESTIONS NUMBERED BA THROUGH 8F. IF THE ANSWER IS "YES" TO MORE THAN MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" ANSWER IS "YES" TO MORE THAN MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" TO MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" TO MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" TO MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" TO MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES," TO MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES," TO MORE THAN MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" TO MORE THAN MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER IS "YES" TO MORE THAN OR THE PERSON OR THE PE	HE BOX IMMEDIATELY FOLLOWING THE QUES- EPARATE PART B FOR EACH "YES" ANSWER TO ONE PART OF THE SINGLE QUESTION OR FOR
	A. QUESTION.—During the past fiscal year did you make or promise or agree to make, directly or indirectly of value (including reimbursed expenses) to any labor organization or to any officer, agent, shop stew labor organization?	
	Mo Yes. If "Yes," enter the number of Part B's required for this question	
	B. QUESTION.—During the past fiscal year did you make, directly or indirectly, any payment (included ployees, or to any group or committee of your employees, for the purpose of causing them to persucise, or as to the manner of exercising, the right to organize and bargain collectively through represent or at the same time disclosing such payment to all such other employees?  No Yes. If "Yes," enter the number of Part B's required for this question	rade other employees to exercise or not to exer-
	C. QUESTION.—During the past fiscal year did you make any expenditures where an object thereof, directions and the state of the past fiscal year did you make any expenditures where an object thereof, directions are stated to the past fiscal year.	anthu ar indirectly was to interfere with restrain
	or coerce employees in the right to organize and bargain collectively through representatives of their or	vn choosing?
	₩ No  Yes. If "Yes," enter the number of Part B's required for this question	
	D. QUESTION.—During the past fiscal year did you make any expenditure where an object thereof, directioning the activities of employees or of a labor organization in connection with a labor dispute in white the past of the activities of employees or of a labor organization in connection with a labor dispute in white the past of the activities of employees or of a labor organization in connection with a labor dispute in white the past of the activities of employees or of a labor organization in connection with a labor dispute in white the past of the activities of employees or of a labor organization in connection with a labor dispute in white the activities of employees or of a labor organization in connection with a labor dispute in white the activities of employees or of a labor organization in connection with a labor dispute in white the activities of employees or of a labor organization in connection with a labor dispute in white the activities of employees or of a labor organization in connection with a labor dispute in white the past of the activities of employees or of a labor organization in connection with a labor dispute in white the past of the activities of employees or of a labor organization in connection with a labor organization and the activities of the	tly or indirectly, was to obtain information con- ch you were involved?
	E. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relation or organization pursuant to which such person undertook activities where an object thereof, directly or or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively through you make any payment (including reimbursed expenses) pursuant to such an agreement or arrangement.  No was Yes. If "Yes," enter the number of Part B's required for this question	indirectly, was to persuade employees to exercise
	F. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relation or organization pursuant to which such person undertook activities where an object thereof, directly of concerning activities of employees or of a labor organization in connection with a labor dispute in white ment pursuant to such agreement or arrangement?  M. No.   Yes. If "Yes." enter the number of Part B's required for this question.	r indirectly, was to furnish you with information
	, and the name of fact by required for this question	1
	TOTAL NUMBER OF PART B'S RE	OURED FOR THIS REPORT IS

### U.S. Department of Labor Employment Standards Administration



			Office of La	bor-Management S	Standards			.4/
Name and Address of Repo	orting Employer					File No.	E-	
						(To be assign	ed by U.S. Dept	. of Labor
		4						
			Refer	o Instructions on P	age 3			
B E Indicate in blocks a example on page 2	t left, question numbe , 3d paragraph under	r to which this Pa "What Must Be F	art B relates and ti	ne consecutive num	ber of this P	art B with resp	ect to that quest	ion. (Se
9. PROVIDE THE FOLLOWI	NG INFORMATION:	Agreement	Payment	☐ Both.	,			
<ul> <li>a. Name and address of group or organization through whom a sepa made or to whom pa tures were made.</li> </ul>	on with whom or rate agreement was	<ul> <li>Position in ployer (if a so state).</li> </ul>	labor organizatio in independent lal	n or with em- oor consultant,			irm or labor orga ed or affiliated.	aniza-
CBC Consul 5900 Lorac Suite 101	ting, Ltd. Drive			* =				
Clarkston,	MI 48346							
.O. Date of the promise, ag		ent pursuant to	which payments o	r expenditures were				
10-01	<b>.</b>							
Mo. Day	Yr.	@ Oral	☐ ₩ritten					
Date of each payment or expenditure	b. Amount of each	payment or expen	diture c	. Kind of each payr and whether in ca	ment or expe	nditure (Specify ty)	whether payme	nt or loan
(1)	(1)		(	1)				
1-7-02	\$103,10	0.00		CHE	CK			
(2)	(2)		(	2)	-	f	- 124	
9								
(3)	(3)		(	3)				
2. Explain fully the circumst	ances of all navments	lockeding the terr	ne of any oral agre	ament or understan	ding pursus	at to which the	ware made	Attach an
additional narrative shee					iding pursua	nt to which the	y were made.	rectaon dir
For service	es rendered	during t	he union	campaign	to ans	wer		
questions o	of employees	s in the	voting b	lock conce	rning	the		
law pertain and the rig	this of the	employee	s rights,	employer	's rig	hts,		
	JACO OI CHE	dilloir.						
		CICNIATI	URE AND VER	ICICATION				
The above employer and	each of his undersign	ed duly authorize	ed officers, declare	s, under the applica	ble penalties	of law, that all	of the informat	ion in this
eport, including all document priect, and complete.	nts referred to therein	and attached he	ereto, has been ex	camined by brim an	id is, to the	best of his kr	lowledge and be	lief, true,
(KK)	3			K.	WII.	1		
GNED		, PRE	SIDENT SIGN	ED Illn	X. Ca	inal	₩~, TR	EASURER
man A	10/10/	(If other t	illa cross	26.4	0.	12/19	/41	Nitte
City State	.10 On 12/19/0	out and correct title	write in At/	City	State	On Date	(If other out and correct tit	title, cross wri'e in tle above.)

### U.S. Department of Labor Employment Standards Administration

Employment Standards Administration Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210 (Rev. 1986)

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(To be assigned by U.S. Dept. of Labor)

Refer to instructions on page 3.

1	-lie two copies. Herer to instructions on page	3.
1.	Full Name of Reporting Employer (including trade name, if any) and mailing address (Street Number, City, State, ZIP Code).	4. Report relating to fiscal period:
	Cintas Corporation #366 810 Widewater Dr., PO 386 Lafayette, IN 47902	Beginning $06-01-01$ and $05-31-02$
2.	Address of Principal Office, if different from address in Item 1.	Ending Day Yr.
		5. Indicate by checking appropriate box where
		records necessary to vertify this report will be available for examination.
_		☐ XAddress in Item 1
3.	Any other address or addresses at which records necessary to verify this report will be available for examination.	Address in Item 2
		Addess C Item 3 V E
5.	Type of organization.	110
	Corporation Partnership Individual Other (Specify)	THE POOR OF THE
		USDOL/ESA
	Industrial Classification (Check appropriate box(es)):	OLMS/DOE/SRD
N		nce, Insurance Services Other If Real Estate (Specify) If HAN I
	READ CAREFULLY THE FOLLOWING QUESTIONS, TAKING INTO CONSIDERATION THE EXCLUSIONS INSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUESTIONS IS "YES," CHECK T TION AND COMPLETE PART B, A COPY OF WHICH APPEARS ON THE REVERSE SIDE. COMPLETE A SI ANY OF THE QUESTIONS NUMBERED 8A THROUGH 8F. IF THE ANSWER IS "YES" TO MORE THAN MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE PART B FOR EACH "YES" ANS	HE BOX IMMEDIATELY FOLLOWING THE QUES- EPARATE PART B FOR EACH "YES" ANSWER TO ONE PART OF THE SINGLE QUESTION OR FOR
	A. QUESTION.—During the past fiscal year did you make or promise or agree to make, directly or indirect of value (including reimbursed expenses) to any labor organization or to any officer, agent, shop stevel labor organization?  No  Yes. If "Yes," enter the number of Part B's required for this question	
	B. QUESTION.—During the past fiscal year did you make, directly or indirectly, any payment (included ployees, or to any group or committee of-your employees, for the purpose of causing them to persure or as to the manner of exercising, the right to organize and bargain collectively through represent or at the same time disclosing such payment to all such other employees?  No Pes. If "Yes," enter the number of Part B's required for this question	lade other employees to exercise or not to exer-
	C. QUESTION.—During the past fiscal year did you make any expenditures where an object thereof, dir or coerce employees in the right to organize and bargain collectively through representatives of their or No Yes. If "Yes," enter the number of Part B's required for this question	ectly or indirectly, was to interfere with, restrain, wn choosing?
	D. QUESTION.—During the past fiscal year did you make any expenditure where an object thereof, direct cerning the activities of employees or of a labor organization in connection with a labor dispute in which the activities of employees or of a labor organization in connection with a labor dispute in which the contraction of the contr	ctly or indirectly, was to obtain information con- ich you were involved?
	No Yes. If "Yes," enter the number of Part B's required for this question	Allers are Mark - Aler I decorded and and
	E. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor relation or organization pursuant to which such person undertook activities where an object thereof, directly or or not to exercise, or as to the manner of exercising, the right to organize and bargain collectively through make any payment (including reimbursed expenses) pursuant to such an agreement or arrangement.  No Types. If "Yes," enter the number of Part B's required for this question	indirectly, was to persuade employees to exercise ough representatives of their own choosing; or did
	F. QUESTION.—During the past fiscal year did you make any agreement or arrangement with a labor religion or organization pursuant to which such person undertook activities where an object thereof, directly of concerning activities of employees or of a labor organization in connection with a labor dispute in white ment pursuant to such agreement or arrangement?	r indirectly, was to furnish you with information
	No Tyes. If "Yes," enter the number of Part B's required for this question	
	TOTAL MUMPER OF BART DE BE	COURSED FOR THIS PERCET IS 1



## U.S. Department of L or Employment Standards Admir on

Office of Labor-Management Standards



Name and Address of Reporting Employer

File No.

E-

(To be assigned by U.S. Dept. oi Labor)

		74-02-0					
			Refe	r to Instructions or	Page 3		
8 E Indicate in blocks a example on page 2	nt left, question numbe , 3d paragraph under	r to which this Pa "What Must Be Fi	rt B relates and led.")	the consecutive n	umber of this Part B	with respect to that o	question. (See
9. PROVIDE THE FOLLOW	ING INFORMATION:	Agreement	☐ Paymen	t 🔲 Both.			
<ul> <li>a. Name and address of group 'or organizati through whom a sepa made or to whom pa tures were made.</li> </ul>	on with whom or rate agreement was			tion or with em- labor consultant,		ldress of firm or labor om employed or affiliat	
CBC Consul 5900 Lorac Suite 101	Drive						
Clarkston,	MI 48346		S.		•		
10. Date of the promise, as 02-02.		ent pursuant to w	which payments	or expenditures w	ere agreed to or ma	ide.	
11. a. Date of each payment or expenditure	b. Amount of each	ayment or expend	diture		ayment or expenditu cash or property)	re (Specify whether pa	syment or loan,
(1)	(1)	1		(1)			
05-02	\$41,600	.00		СН	ECK		- 191 - 1 - 191 - 1914
(2)	(2)			(2)		S Re	EST CIONA
(3)	(3)			(3)		(0)	LMS
12. Explain fully the circumst additional narrative shee For service questions of law pertain and the rig	es rendered of employees ling to the	during to in the	he union	campaigr	to answe	r	e. Attach any
a)		SIGNATU	RE AND VI	RIFICATION			
The above employer and eport, including all documen correct, and complete.	each of his undersignits referred to therein  On 4-35-	ed duly authorized and attached her	l officers, decla reto, has been SIDENT SIG	res under the appli	cable penalties of la and is, to the best	L-35-02 (If out	mation in this d belief, true,  , TREASURER  other title, cross and wri'e in act title above.)

NOTE,—Only one Part B of an LM-10 report need be signed and verified since the Part B so executed will be deemed to cover and include all Part B's filed with the report.

146.12

## U.S. Department of Labor Employment Standards Administration

Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210 (Rev. 1986)

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File No. (To be assigned by U.S. Dept. of Labor)

File two copies.	Refer to instructions on page 3.
1. Full Name of Reporting Employer (including trade name, if any) and main City, State, ZIP Code).  Cintas Corporation #606 409 N. Thierman Rd. Spokane, WA 99212	lling address (Street Number, Beginning $06-30-01$ Beginning $\frac{06-30-01}{\text{Mo. Day Yr.}}$ and Ending $05-31-02$
2. Address of Principal Office, if different from address in Item 1.	Mo. Day Yr.
	5. Indicate by checking appropriate box where records necessary to vertify this report will be available for examination.  XXAddress in Item 1
<ol><li>Any other address or addresses at which records necessary to verify this examination.</li></ol>	The state of the s
	Address in Item 2
6. Type of organization.      Corporation   Partnership   Individual   Other	(Specify)
7. Industrial Classification (Check appropriate box(es)):	1
Manufacturing Mining Construction Transportation Communi and Util	ities Retail Trade and Real Estate (Specify)
INSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUI	DERATION THE EXCLUSIONS LISTED FOR ITEMS 8A THROUGH 8F OF THE ESTIONS IS "YES," CHECK THE BOX IMMEDIATELY FOLLOWING THE QUESVERSE SIDE. COMPLETE A SEPARATE PART B FOR EACH "YES" ANSWER TO ER IS "YES" TO MORE THAN ONE PART OF THE SINGLE QUESTION OR FOR PART B FOR EACH "YES" ANSWER TO THAT QUESTION.
	ree to make, directly or indirectly, any payment or loan of money or other thing or any officer, agent, shop steward, or other representative or employee of any or this question
ployees, or to any group or committee of your employees, for the purp	
C. QUESTION.—During the past fiscal year did you make any expenditure or coerce employees in the right to organize and bargain collectively through the past of th	
D. QUESTION.—During the past fiscal year did you make any expenditure cerning the activities of employees or of a labor organization in connection.  No Yes. If "Yes," enter the number of Part B's required for	
E. QUESTION.—During the past fiscal year did you make any agreement or or organization pursuant to which such person undertook activities where	
F. QUESTION.—During the past fiscal year did you make any agreement of or organization pursuant to which such person undertook activities where concerning activities of employees or of a labor organization in connectiment pursuant to such agreement or arrangement?	or arrangement with a labor relations consultant or other independent contractor e an object thereof, directly or indirectly, was to furnish you with information on with a labor dispute in which you were involved; or did you make any pay-
No [] Yes. If "Yes," enter the number of Part B's required for	4
TOTA	AL NUMBER OF PART B'S REQUIRED FOR THIS REPORT IS



#### U.S. Department of Labor Employment Standards Admin on Office of Labor-Management Standards



Name and Address of Reporting Employer

File No.	E-		

(To be assigned by U.S. Dept. of Labor)

					5 3° 5° 2° 4
		Re	fer to Instructions on Pa	age 3	NEW CO.
8 E Indicate in blocks a	t left, question number	to which this Part B relates a			pect to that question. (See
9. PROVIDE THE FOLLOWI		Agreement Payme	nt 🗍 Both.		
Name and address of group or organization through whom a sepa made or to whom patures were made.	person, committee, on with whom or rate agreement was	b. Position in labor organize ployer (if an independent so state).	ation or with em-	c. Name and address of t tion with whom employ	irm or labor organiza- red or affiliated.
CBC Consul 5900 Lorac Suite 101	Drive				
Clarkston,	MI 48346				
	greement or arrangeme	ent pursuant to which paymen  Oral Written	ts or expenditures were	agreed to or made.	u. v
11. a. Date of each payment or expenditure	b. Amount of each p	payment or expenditure	c. Kind of each paym and whether in cas		y whether payment or loan,
03-02	\$34,00	0.00	CHEC	:K	Jahren Joseph (1997)
(2)	(2)		(2)		3
(3)	(3)		(3)		
For service questions questions questions	ets that are necessary es rendered of employees	during the terms of any oral to fully explain the required in during the unic in the voting employees right union.	formation. On campaign	to answer	ey were made. Attach any
			, santa esta esta esta esta esta esta esta es		1.74
		SIGNATURE AND	VERIFICATION		
correct, and complete.	l each of his undersign hts referred to therein	ed duly authorized officers, dec and attached hereto, has bee	clares, under the applical programme examined by him and	ble penalties of law, that a d is, to the best of his k	If of the information in this nowledge and belief, true,
at City ASON, State	(+ on H-)5	Out and write in correct title above.)	IN ASON	OA on 425	TREASURER  (If other title, cross out and wri's in correct title above.)

NOTE.—Only one Part B of an LM-10 report need be signed and verified since the Part B so executed will be deemed to cover and include all Part B's filed with the report.

#### U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210

(Rev. 1986)

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

Form approved - OMB No. 1215-0188 Expires 11-30-2002

File No.	E-	2	49	P	
(To be assigned	by l	U.S.	Dept.	of	Labor)

File two copies.	Refer to instructions on p	page 3.			
<ol> <li>Full Name of Reporting Employer (including trade name, if any) and mai City, State, ZIP Code).</li> </ol>	ling address (Street Numb	per, 4. Report	relating to	fiscal pe	riod:
Cintas Corp. (Indiana facilities - Ft. Wayne, South Ben 6800 Cintas Blvd., PO Box 625737		Beginning	06 Mo. 05	01 Day 31	01 Yr. 02
2. Address of Principal Office, it different from address in Item 1.			Mo.	Day	Yr.
		records be avail	necessary able for exa	to vertify	priate box whe this report w
<ol> <li>Any other address or addresses at which records necessary to verify this examination.</li> </ol>	report will be available	for Address	in Item 2		
6. Type of organization.  □ Corporation □ Partnership □ Individual □ Other			in tem o	OLMS	US DOLES
Gorporation Grantiership Gindividual Gottler	(Specify)			ORL	DA
7. Industrial Classification (Check appropriate box(es)):		1			
Manufacturing Mining Construction Transportation Communic and Utili  A		Finance, Insurance and Real Estate G	Servi		Other (Specify)
8. READ CAREFULLY THE FOLLOWING QUESTIONS, TAKING INTO CONSIDINSTRUCTIONS (SEE PAGE 3). IF YOUR ANSWER TO ANY OF THE QUESTION AND COMPLETE PART B, A COPY OF WHICH APPEARS ON THE REVANY OF THE QUESTIONS NUMBERED BA THROUGH 8F. IF THE ANSWE MORE THAN ONE PERSON OR ORGANIZATION, COMPLETE A SEPARATE P	STIONS IS "YES," CHEC ERSE SIDE. COMPLETE R IS "YES" TO MORE TH	K THE BOX IMM A SEPARATE PAR IAN ONE PART C	EDIATELY T B FOR E OF THE SIN	FOLLOWI FACH "YE IGLE QUE	ING THE QUES
A. QUESTION.—During the past fiscal year did you make or promise or agr of value (including reimbursed expenses) to any labor organization or to labor organization?  **Bo	any officer, agent, shop	steward, or other			
B. QUESTION.—During the past fiscal year did you make, directly or in ployees, or to any group or committee of your employees, for the purp cise, or as to the manner of exercising, the right to organize and bargai or at the same time disclosing such payment to all such other employees?  No Yes. If "Yes," enter the number of Part B's required for	ose of causing them to p n collectively through repr	ersuade other en resentatives of the	nployees to	exercise	or not to exe
C. QUESTION.—During the past fiscal year did you make any expenditure or coerce employees in the right to organize and bargain collectively through No Yes. If "Yes," enter the number of Part B's required for	ugh representatives of the		ctly, was to	o interfere	e with, restrain
D. QUESTION.—During the past fiscal year did you make any expenditure of cerning the activities of employees or of a labor organization in connection.  No Yes. If "Yes," enter the number of Part B's required for	on with a labor dispute in	which you were		obtain ir	nformation con
E. QUESTION.—During the past fiscal year did you make any agreement or or organization pursuant to which such person undertook activities where or not to exercise, or as to the manner of exercising, the right to organization where the manner of exercising the right to organization make any payment (including reimbursed expenses) pursuant to such that the property of the property	e an object thereof, directly re and bargain collectively n an agreement or arrange	y or indirectly, wa through represen- ment?	s to persua	de employ	yees to exercise
F. QUESTION.—During the past fiscal year did you make any agreement or or organization pursuant to which such person undertook activities where concerning activities of employees or of a labor organization in connection ment pursuant to such agreement or arrangement?	an object thereof, direct	ly or indirectly, w	as to furni	ish you w	ith information
No ☐ Yes. If "Yes," enter the number of Part B's required for	1000000				1
TOTA	L NUMBER OF PART B'S	REQUIRED FOR	THIS REF	PORT IS	I

### U.S. Department of Labor Employment Standards Administration

Office of Labor-Management Standards



Name and Address of Reporting Employer

File No. E-

(To be assigned by U.S. Dept. of Labor)

	Refer to Instructions on Page 3		
	It left, question number to which this Part B relates	and the consecutive number of this Part B with respect to the	at question. (See
8 E example on page 2	, 3d paragraph under "What Must Be Filed.")		
9. PROVIDE THE FOLLOW	NG INFORMATION: Agreement Payn	nent Both.	
<ul> <li>a. Name and address of group or organization through whom a sepa made or to whom pa tures were made.</li> </ul>	on with whom or ployer (if an independe rate agreement was so state).		
CBC Consul 5900 Lorac Suite 101	ting, Ltd. Drive		
Clarkston,	MI 48346		
	greement or arrangement pursuant to which payme		
0 4 − 0 1 Mo. Day	Yr. Oral Written		
a. Date of each pay- ment or expenditure	b. Amount of each payment or expenditure	<ul> <li>Kind of each payment or expenditure (Specify whethe and whether in cash or property)</li> </ul>	r payment or loan,
(1)	(1)	(1)	
9-28-01	\$56,175.00	CHECK	
(2)	(2)	(2)	
(3)	(3)	(3)	
For service questions of law pertain	ances of all payments, including the terms of any oracles that are necessary to fully explain the required es rendered during the uniof employees in the voting aing to the employees right this of the union.	on campaign to answer block concerning the	nade. Attach any
	SIGNATURE AND	VERIFICATION	
The above employer and port, including all document orrect, and complete.	l each of his undersigned duly authorized officers, don'ts referred to therein and attached hereto, has be	eclares, under the applicable penalties of law, that all of the seen examined by him and is, to the best of his knowledge significant.	information in this e and belief, true, , TREASURER
Consummer	8-22-01 (If other title, cross out and write in correct title above.)	A Concensuite OH on 8-23 Q	(If other title, cross out and wri's in correct title above.)

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